



**PLEASE SUBMIT THIS FORM WITH YOUR CHECK OR MONEY ORDER**

**APPLICATION FOR LICENSURE**

*The Court Reporters Board is required by law to have an address, and phone number, of record for each of its licensees. This address is provided to the public. You may also select a second address that is not disclosed to the public but is used by the Board to contact you.*

NAME:		
ADDRESS OF RECORD (FOR PUBLIC DISCLOSURE):		
CITY	STATE	ZIP
TELEPHONE (     )		
ADDRESS (FOR BOARD CONTACT):		
CITY	STATE	ZIP
TELEPHONE (     )		
BIRTHDATE:		
EMAIL ADDRESS (for Board use only):		

On the next line PRINT your name **EXACTLY** as you wish it to appear on your certificate: \*

\_\_\_\_\_  
SIGNATURE

If additional space is needed to complete any section of this application, use additional sheets and attach hereto. You have a right to review the files on record, which are maintained on you by the board unless the records are exempted under Section 1798.40 of the Civil Code.

There will be NO RESULTS or SCORES given over the telephone. DO NOT CALL THE BOARD OFFICE FOR THIS INFORMATION. There will be no exceptions. All results will be mailed.

\*If different from the name of your application, please submit documentary proof of change; a copy of the marriage certificate or divorce decree.